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UTILITY PATENT APPLICATION		Alloid	Customer No. 01333	
TRANSMITTAL UNDER 37 CFR 1.53(b)	Evnr	ess Mail Label	No.	
To: Commissioner for Patents	Expi		0,	
P.O. Box 1450	EV29	3509726US	9.5	
Alexandria, VA. 22313-1450		0 L.	1 22 2003 SE	
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			35	
First Named Inventor (or Application Identifier):				
Brian R. Miller, et al				
Enclosed are:	6.	X Assignme	ent of the invention to	
1. X Specification		Eastman	Kodak Company	
2. 8 Sheet(s) of drawing(s)	7.		copy of a priority	
<ol> <li>Sheet(s) of drawing(s)</li> <li>Information Disclosure Statement Under 37 C</li> </ol>	CFR 8.	Associat	e Power of Attorney	
1.97.  4. Combined Declaration for Patent Application and Power of Attorney:				
4. Combined Declaration for Patent Application and 10 to 1				
4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with 25%				
Deletion of Inventor(s).				
5. Incorporation by Reference (useable if Box 4b is  Signed statement attached deleting inventor(s) named  Signed statement attached deleting inventor(s) and				
checked) The entire disclosure of the prior application, see 37 CFR 1.03(d)(2) and in the prior application, see 37 CFR 1.03(d)(2) and				
is considered as being part of the disclosure of the decempany				
application and is hereby incorporated by reference therein.  10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1,				
a statistic important the following.				
CROSS REFERENCE TO RELATED APPLICATION Reference is made to and priority claimed from U.S. Provisional Application Serial No.,				
If a CONTINUING APPLICATION, check appropriate box and supply of prior application No:				
Continuation Divisional Continuation in part (5-5)				
12. X Please address all written communications to Thomas H. Close, Patent Legal Staff,				
12. X Please address an written communication of the Please Address an written communication of the Please Address and Please Addre				
	1. Sliaw at 50.	, , , , , , , , , , , , , , , , , , , ,		
The filing fee has been calculated as shown below:  FOR:  NO. FILED  NO.	O. EXTRA	RATE	FEE	
FOR:	J. 12.14		\$ 770	
BASIC FEE TOTAL CLAIMS  18 - 20 =	-2	x 18 =	\$ 0 \$ 0	
INDEPENDENT CLAIMS 2 - 3 =	-1	x 86 = + 290	\$0	
MULTIPLE DEPENDENT CLAIM PRESENTE	D	TOTAL	\$ 770	
X Please charge my Eastman Kodak Company Deposit Account No. 05-0225 in the amount of \$ 770				
The Commissioner is hereby authorized to charge any additional filing fees required under  X The Commissioner is hereby authorized to charge any additional filing fees required under				
The Commissioner is hereby authorized to charge any additional fining records.  37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.  A duplicate copy of this sheet is enclosed.				
At A A Man				
Assume for Applicants				
Stephen H. Shaw/clb	Attor	Attorney for Applicants Registration No. 45,404		
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